## PRINTER RUSH (PTO ASSISTANCE) 700/65 Examiner: Engle Application: GAU: Location: IDC FMB FDC From: Date: Tracking #: Week Date: DOC CODE **DOC DATE MISCELLANEOUS** 1449 Continuing Data IDS Foreign Priority **CLM Document Legibility IIFW** Fees **SRFW** Other **DRW OATH** 312 **SPEC** [RUSH] MESSAGE: Please re-apply recent Notice of Allowance. tho [XRUSH] RESPONSE: \_\_\_\_ Kone

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04

INITIALS: R. C.

## UN-US. US PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

and the last

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notificatio									
CURRENT CORRESPONDENCE	papers, Each	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
300 S. WACKER 32ND FLOOR		one at min	OFF LLP	I hereby cert States Postal addressed to transmitted to	fy that the Service with Mai the USP	rtificate of Mail his Fee(s) Transa with sufficient p il Stop ISSUE 1 PTO (703) 746-4	ing or Trans nittal is bein ostage for fir FEE address 000, on the	mission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.	
E CHICAGO, IL 600	1	AUG U 4 ALL		Rebec				(Depositor's name)	
	•		£/	Retrect	× 40	Cours		(Signature)	
		CATE TRADENIA		Augus	t 4,	2005		(Date)	
APPLICATION NO.	O. FILING DATE		IRST NAMED	LIVENTOR	TOR A		OCKET NO.	CONFIRMATION NO.	
10/700,165	11/03/2003		Blackford	i Brauer		03-91	0	3676	
TITLE OF INVENTION: H	IEADACHE RACK FOR PI	CKUP TRUCKS							
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION F	UBLICATION FEE		(S) DUE	DATE DUE	
nonprovisional	NO	\$0	SO			\$0		08/08/2005	
. EXAMINER ART U			Г	CLASS-SUBCLA	ss	]			
ENGLE, PAT	3612	2 296-003000							
1. Change of correspondence CFR 1.363).	1	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys							
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively, (2) the name of a single firm (having as a member a						LLF
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	ation form e of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	E PRINTED ON TH	E PATENT	(print or type)					
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified by 37 CFR 3.11. Completion	clow, no assignce de of this form is NOT	ata will appo a substitute f	ear on the patent. If for filing an assignment	an assign nt.	nee is identified	below, the d	ocument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Knaack Manu	facturing Co	mpany	Cryst	al Lake,	1111	nois			
Please check the appropriate	assignee category or category	ries (wili not be prin	nted on the pa	nent): 🚨 Individu	al 🖾 Co	orporation or oth	er private gn	oup entity Government	
4a. The following fee(s) are		b. Payment of Fee(s):							
☐ Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed.						
Advance Order - # of		Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-2490 (enclose an extra copy of this form).							
			Deposit Acco	ount Number 13	2490	(enclo	se an extra c	opy of this form).	
	(from status indicated above MALL ENTITY status. See		b. Applica	ant is no longer claimi	ng SMA	LL ENTITY stat	us. See 37 C	FR 1.27(g)(2).	
ike Director of the USPTO OTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issublication Fee (if required)	ue Fee and Publication	on Fee (if any from anyone					ntion identified above, the assignee or other party in	
Authorized Signature	nthowlet	mren	ing			gust 4,			
Typed or printed name _	Anthoula Pom	rening	<u>U</u>	Rep	gistration	No. 38,8	0.5		
in application. Confidential withmitting the completed arthis form and/or suggestions 30x 1450, Alexandria, Virg Alexandria, Virginia 22313-	ity is governed by 35 U.S.C. plication form to the USPT is for reducing this burden, simia 22313-1450. DO NOT 1450.	. 122 and 37 CFR 1. O. Time will vary duould be sent to the CSEND FEES OR CO	14. This coll epending up Chief Inform OMPLETED	ection is estimated to on the individual case ation Officer, U.S. Pe FORMS TO THIS A	take 12 is. Any content and DDRESS	minutes to compound the Trademark Office S. SEND TO: Co	lete, includir amount of the ce, U.S. Dep immissioner	d by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	
Jnder the Paperwork Reduc	tion Act of 1995, no persons	are required to resp	ond to a colle	ection of information	unless it	displays a valid	OMB control	number.	
PTOL-85 (Rev. 12/04) App	roved for use through 04/30	2007.	OMB 065	1-0033 U.S. Paten				TMENT OF COMMERCE 0000013 10700165	

01 FC:1501 02 FC:1504 03 FC:8001

1400.00 OP 300.00 OP 3.00 OP